

CJA 23 Rev. 5/98		FINANCIAL AFFIDAVIT		IN SUPPORT OF REQUEST FOR ATTORNEY, EXPERT OR OTHER COURT SERVICES WITHOUT PAYMENT OF FEE	
IN THE CASE OF		IN UNITED STATES		<input type="checkbox"/> MAGISTRATE <input type="checkbox"/> DISTRICT <input type="checkbox"/> APPEALS COURT or <input type="checkbox"/> OTHER PANEL (Specify below)	
U.S.A. v. <u>Susan C. Mckitrick</u>		FOR		LOCATION NUMBER <div style="border: 1px solid black; padding: 5px; display: inline-block;">269</div>	
		AT			
PERSON REPRESENTED (Show your full name)		1 <input checked="" type="checkbox"/> Defendant—Adult 2 <input type="checkbox"/> Defendant - Juvenile 3 <input type="checkbox"/> Appellant 4 <input type="checkbox"/> Probation Violator 5 <input type="checkbox"/> Parole Violator 6 <input type="checkbox"/> Habeas Petitioner 7 <input checked="" type="checkbox"/> 2255 Petitioner 8 <input type="checkbox"/> Material Witness 9 <input type="checkbox"/> Other		RECEIVED JAN 01 2007 CLERK, U.S. DISTRICT COURT ANCHORAGE, ALASKA	
<u>Susan christine mckitrick</u>		DOCKET NUMBERS			
CHARGE/OFFENSE (describe if applicable & check box →)		<input checked="" type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor		District Court 2007 Court of Appeals	
<u>methamphetamine conspiracy</u>					

ANSWERS TO QUESTIONS REGARDING ABILITY TO PAY		
ASSETS	EMPLOYMENT	Are you now employed? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Am Self-Employed Name and address of employer: <u>FCI Dublin, Unicom</u> IF YES, how much do you earn per month? \$ <u>80.00</u> IF NO, give month and year of last employment How much did you earn per month? \$ _____
	OTHER INCOME	If married is your Spouse employed? <input type="checkbox"/> Yes <input type="checkbox"/> No IF YES, how much does your Spouse earn per month? \$ <u>n/a</u> If a minor under age 21, what is your Parents or Guardian's approximate monthly income? \$ <u>n/a</u>
	CASH	Have you received within the past 12 months any income from a business, profession or other form of self-employment, or in the form of the form of rent payments, interest, dividends, retirement or annuity payments, or other sources? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No IF YES, GIVE THE AMOUNT RECEIVED & IDENTIFY THE SOURCES <u>RECEIVED 100.00 From my mother</u>
	PROPERTY	Have you any cash on hand or money in savings or checking accounts? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No IF YES, state total amount \$ _____ Do you own any real estate, stocks, bonds, notes, automobiles, or other valuable property (excluding ordinary household furnishings and clothing)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No IF YES, GIVE THE VALUE AND DESCRIBE IT

OBLIGATIONS & DEBTS	DEPENDENTS	MARITAL STATUS <input checked="" type="checkbox"/> SINGLE <input type="checkbox"/> MARRIED <input type="checkbox"/> WIDOWED <input type="checkbox"/> SEPARATED OR DIVORCED	Total No. of Dependents <u>n/a</u>	List persons you actually support and your relationship to them _____ _____ _____
	DEBTS & MONTHLY BILLS (LIST ALL CREDITORS, INCLUDING BANKS, LOAN COMPANIES, CHARGE ACCOUNTS, ETC.)	APARTMENT OR HOME: <u>none while in prison</u> <u>Ketchikan credit Bureau</u> <u>APR-2-5 Thousand</u>	Creditors Total Debt Monthly Paymt.	_____ _____ _____

I certify under penalty of perjury that the foregoing is true and correct. Executed on (date)

12-26-06

SIGNATURE OF DEFENDANT
(OR PERSON REPRESENTED)
